



*L. A. L. L. L.*



W E L L S - N E X T - T H E - S E A

U R B A N   D I S T R I C T   C O U N C I L .

A N N U A L   R E P O R T

of the

M E D I C A L   O F F I C E R   O F   H E A L T H .

for the year 1957

to which is appended the

R E P O R T

of the

P U B L I C   H E A L T H   I N S P E C T O R .



1.

WELLS-NEXT-THE-SEA URBAN DISTRICT COUNCIL.

Public Health Department

-----

STAFF

Medical Officer of Health

W.H. CRICHTON, C.I.E., M.B., Ch.B., D.P.H.

Public Health Inspector

F. RODWELL, M.R.San.I., M.S.I.A.

## CONTENTS.

The Staff of the Public Health Department .....	p. 1.
The Public Health Committee .....	p. 2.
Preface .....	p. 3.
<u>Part I - The Report of the Medical Officer of Health</u> <u>- General</u> .....	p. 4 - 9
Staff .....	p. 4
General Character and Population .....	p. 4
Meteorological Conditions .....	p. 4
Vital Statistics .....	p. 4 - 6
Communicable Diseases .....	p. 6 - 8
Environmental Sanitation .....	p. 8 - 9
<u>Appendix A - Climatic Data</u> .....	p. 10
<u>Appendix B - Water Tests - Chemical and Bacteriological</u> .....	p. 11
<u>Appendix C - Note on the Fluoridation of Water Supplies</u> .....	p. 12 - 14
<u>Part II - The Report of the Surveyor and Public Health</u> <u>Inspector</u> .....	p. 15 - 19

WELLS-NEXT-THE-SEA URBAN DISTRICT COUNCIL.

Public Health Committee.

1957

---

Chairman - Mr. C.A. CLAXTON (deceased) up to 1. 4.57.  
Mr. T.C. GRANGE From 1. 4.57.

Members - Mr. H.N. ALDRIDGE  
Mr. J. CADAMY  
Mrs. V.R. CHAMBERLIN  
Mr. J.R. COX.  
Mr. L. COX  
Mr. H.W. DUNSDON  
Mr. A.W. DRURY  
Dr. E.W. HICKS  
Mr. W.F. THURGUR  
Mr. A.M. TUCK

---

- PREFACE -

The Chairman and Members,  
Wells-next-the-Sea Urban District Council.

Mr. Chairman, Ladies and Gentlemen,

Annual Public Health Report 1957.

I have much pleasure in presenting for your information a copy of my Annual Report for 1957 to the Minister of Health on the public health of the District.

Although the birth rate has gone down and both the death rate and infant mortality rates have risen, the differences are infinitesimal and not of serious significance. Perhaps the only disquieting feature is the rise in the number of deaths from cancer.

Wells-next-the-Sea has maintained its high standard of freedom from notifiable diseases. On the other hand there is evidence of a considerable incidence of coughs and colds, influenza and dental caries, ailments which are by no means peculiar to this District. Good progress has been made with the protection of children against poliomyelitis by vaccination and a scheme for the protection of school leavers against Tuberculosis by B.C.G. vaccination has been inaugurated.

The most urgent problem affecting the District is undoubtedly housing. Despite the relatively large number of houses built by the Council, there are still a considerable number of people living in sub-standard accommodation. It is hoped that action will be taken to clear the worst affected areas as soon as possible (see. page 8).

Your obedient Servant,

W.H. CRICHTON,

MEDICAL OFFICER OF HEALTH.

PART I- General -1. Staff -

There have been no changes in the Staff of the Public Health Department. Mr. F. Rodwell, as Surveyor and Senior Public Health Inspector, has, in my opinion, more than one well qualified and experienced Inspector can adequately cope with.

2. General Character and Population -

a) Population - The Registrar General's estimate of the population for the mid year 1957 is 2,600. This is ten more than the figure for the preceding year.

On a basis of natural increase there should have been no addition to the population as the number of deaths recorded exceeds the number of births by one.

Wells however, with its many facilities for shopping, transport and education and its excellent beaches and pleasant surroundings continues to attract people from the neighbouring Districts to reside in during their active years and to settle in after retirement. There are also quite a considerable number of U.S.A.F. families living in the District.

b) Area - 2,670 acres.

c) Rateable Value = £21,750 (£3. 7. 4d. per head of population).

d) Sum represented by the penny rate = £82. 4. 6d.

3. Meteorological Conditions - The meteorological data shown in Appendix A (page 10) are records of observations taken at Raynham which are supplied to me by courtesy of the R.A.F. They serve as an indication of the weather conditions in the neighbouring Districts. In Wells however a record is maintained of the rainfall and this was as follows:-

January	1.75"	April	0.40"	July	1.74"	October	1.30"
February	2.80"	May	1.06"	August	1.56"	November	2.05"
March	1.83"	June	1.92"	Septem-ber	3.78"	December	2.34"

Total..... 22.53 inches.

- Vital Statistics -1. Births

a) The number of live births registered during the year has fallen considerably as compared with the preceding year - only 31 births were registered as against 50. Thus:-

	<u>Males</u>	<u>Females</u>	<u>Totals</u>
Legitimate	13 (28)	17 (19)	30 (47)
Illegitimate	1 (1)	- ( 2)	1 ( 3)
Totals .....			31 (50)



b) The live birth rate per 1,000 population is therefore 11.9 as compared with 19.30 in the preceding year. The birth rates during the last four years were as follows:-

<u>1953</u>	<u>1954</u>	<u>1955</u>	<u>1956</u>
18.0	18.8	15.4	19.30

c) The adjusted birth rate ( $11.9 \times 1.10$ ) is 13.09 per 1,000 which is considerably lower than 24.42, the rate for the preceding year.

d) The illegitimate birth rate has decreased to 3.4% of the total births as against 6% in the preceding year.

## 2. Deaths -

a) The total number of deaths from all causes recorded by the Registrar General was 32, that is to say six more than in the preceding year. These represent a Crude Death Rate of 12.3 per 1,000 population, compared with 10.4 per 1,000 in the preceding year.

b) The adjusted death rate ( $12.3 \times 0.84$ ) is 10.33 per 1,000 compared with 8.73 in the preceding year.

c) The Causes of Death recorded by the Registrar General were as follows:-

Causes of Death	Males	Females	Totals
Syphilitic Disease	- (-)	1 (-)	1 (-)
Cancer, stomach	2 (-)	1 (-)	3 (-)
" bronchus	1 (-)	- (-)	1 (-)
" breast	- (-)	2 (1)	2 (1)
" other forms	2 (2)	3 (1)	5 (3)
Diabetes	- (-)	1 (-)	1 (-)
Vascular lesions, nervous system	1 (2)	- (1)	1 (3)
Coronary disease	1 (2)	1 (-)	2 (2)
Other heart diseases	3 (2)	2 (3)	5 (5)
Other diseases of circulation	1 (3)	1 (1)	2 (4)
Influenza	1 (-)	- (-)	1 (-)
Bronchitis	- (3)	- (-)	- (3)
Other diseases, respiratory system	1 (-)	- (1)	1 (1)
Gastritis, enteritis	- (-)	1 (-)	1 (-)
Other diseases	3 (1)	3 (2)	6 (3)
Nephritis	- (-)	- (1)	- (1)
Totals	16 (15)	16 (11)	32 (26)



The most striking difference between the figures for the year under review and those of the preceding year (in brackets) is the relatively large increase in the deaths from cancer which accounts for nearly three times the number reported last year. Their ratio to the total number of deaths has risen from 15.4% last year to 34.3% this year. The one death from cancer of the bronchus was in a male and he happened to be a heavy smoker.

d) The deaths by age groups are shown in the table below. The figures do not tally exactly with those in the Registrar General's statement as these have been adjusted for "transferable" deaths.

	Males	Females	Totals
Under 1 year	1 ( - )	- ( - )	1 ( - )
- 5 years	- ( - )	- ( - )	- ( - )
- 10 "	- ( - )	1 ( - )	1 ( - )
- 20 "	- ( - )	- ( - )	- ( - )
- 30 "	- ( - )	1 ( 1 )	1 ( 1 )
- 40 "	- ( - )	2 ( - )	2 ( - )
- 50 "	1 ( 2 )	- ( 1 )	1 ( 3 )
- 60 "	2 ( 4 )	4 ( 1 )	6 ( 5 )
- 70 "	4 ( 1 )	3 ( 1 )	7 ( 2 )
- 80 "	6 ( 4 )	3 ( 7 )	9 ( 11 )
- 90 "	4 ( 4 )	2 ( 4 )	6 ( 8 )
- 100 "	1 ( 1 )	2 ( - )	3 ( 1 )
Totals	19 ( 16 )	18 ( 15 )	37 ( 31 )

Apart from the one infant death, the fatalities in the younger age groups were due to a tumour of the kidney (female 9); epilepsy with fatty degeneration of the heart (female 25). Cancer of the breast accounted for the death of two young females of 39 and 37 years of age; and cancer of the tongue in a male of 46.

e) Infant Mortality - There was only one infant death, a boy of four weeks who died accidentally of anoxia. The infant mortality rate is therefore 32.2 per 1,000 live births. The rate in the preceding years was as follows:-

<u>1952</u>	<u>1953</u>	<u>1954</u>	<u>1955</u>	<u>1956</u>
53.37	21.27	Nil	75.0	Nil

#### - Communicable Diseases -

1. Measles - There were only two notifications - one in July, the other in August - both in pre-school children. These were indeed the only two official notifications of any disease during the whole year. This is all the more remarkable because of the position of Wells as a centre for shopping, education, transport and amusement and because it so happens that there was a record incidence of measles and whooping cough in both adjoining Rural Districts.

2. Coughs and Colds - These perhaps accounted for more illness and absences from School than anything else. These recurring complaints have come to be regarded as inevitable in an organised community. I can only hope that their prevention will be possible as they cause a great deal of harm.

3. Influenza - Wells did not escape the influenza epidemic (Asian) as far as one could judge by the number of absences from school and unofficial reports by Family Doctors. By the end of September absences from the Senior School accounted to as much as 48% and in the Junior School to 30%. The epidemic covered a period from mid September to the end of October. On the whole the attacks were mild with presenting symptoms of headache, nausea and vomiting.

4. Mumps - One case of mumps was reported by school authorities in December.

5. Poliomyelitis -

The poliomyelitis vaccination programme was resumed in May as soon as supplies of vaccine became available. The removal of the ban on vaccinations in the summer months made it possible for the programme to make substantial progress and, by the end of the year, all children who had been registered in 1956 had been vaccinated with two doses. Public confidence in the vaccine grew as the vaccination programme proceeded and an increasing number of applications were received for the expanded programme which was to include all children from 6 months to 15 years and certain priority groups i.e. Family Doctors and their families, expectant mothers and ambulance staff.

6. Tuberculosis - The programme of vaccination against tuberculosis by B.C.G. vaccination preceded by the Heaf (tuberculin) skin test was initiated in the autumn at the secondary modern school among school leavers. Thirty nine children were tested and of these sixteen or 41.2% were found to be positive reactors. The remaining thirteen were vaccinated with B.C.G. vaccine and the positive reactors were X-rayed and found normal.

It is of interest to note that the percentage of Tuberculin reactors in the sea coast areas (Wells, Hunstanton and Dersingham) is appreciably higher than that found in the inland centres (Fakenham and Melton Constable). One possible explanation is the greater opportunity of contact of the local inhabitants with the influx of holidaymakers to the seaside than is the case in the inland centres.

No case of Tuberculosis was reported during the year.

7. Immunisations and Vaccinations -

For the fifth year in succession no case of diphtheria was reported. The number of immunisations carried out during 1957 in the Health Area was as follows:-

a)

Age Groups	Under 1 yr.	1 - 4 yrs.	5 - 14 yrs.	Totals
Primary (Dip & Whooping Co).	311	148	170	629
Booster (Dip. only).	-	-	631	631
Totals	311 (248)	148 (95)	801 (782)	1260 (1125)

Figures in brackets refer to the preceding year.

b) The following vaccinations against smallpox were carried out during the year.

Age Groups	Under 1 yr.	1 - 2	3 - 4	5 - 14	15+	Totals
Primary	367	19	26	18	32	462
Re-vaccinations.	-	-	2	14	83	99
Totals	367 (214)	19 (15)	28 (23)	32 (22)	115 (65)	561 (349)

Figures in brackets refer to the preceding year.

#### 8. Cancer and Smoking -

The attention of the Council was drawn to the Ministerial report on the correlation of cancer of the lung to smoking. Due note was taken of the findings. The local incidence of cancer of the lung since 1947 amounts to only 6 cases.

#### - Environmental Sanitation -

The Surveyor and Public Health Inspector has dealt in detail with environmental matters in his report (Part II).

1. Housing - This continues to be the most serious and urgent environmental problem in Wells although, as reported last year, the Council have constructed a very large number of houses in the past - a total of 290 dwellings - relative to the population of the District.

Nevertheless a considerable number of families still live in substandard houses and frequent and very justifiable complaints were received throughout the year from distressed people. The most serious complaint is that of dampness and of dilapidation and of inadequate amenities including outdoor pail closets of archaic construction.

The number of applicants for Council houses has risen from 51 to 56 although 23 families have been rehoused during the year.

The situation has been rendered more acute by the fact that, for the time being, the building programme is at a standstill owing to the high rate of interest and other financial restrictions and by the presence of a number of families of U.S.A.F. personnel.

Preliminary surveys have been undertaken of a particularly bad residential area and it is hoped to make an official representation for a substantial clearance area during the forthcoming year.

2. Water Supply - The supply of water has been adequate to meet the demands but the balance is precarious especially during the summer months and it is hoped that the situation will be improved by the scheme of integration which is now under discussion.

The quality of the water chemically and bacteriologically is regarded as satisfactory (vide summary of findings - Appendix B on page 11 )



It will be noted however that apart from the very high degree of hardness, the water suffers from another serious defect in that the fluorine content is only 0.25 parts per million. This deficiency is reflected in the very deplorable condition of the children's teeth. It is to be hoped that a decision on the fluoridation of water supplies as an important public health measure will soon be made and that the necessary amount of fluoride will be added to the water supply in due course to protect the teeth of the community from the present ravages of caries (decay) although this may not be the only factor in its causation.

A special note on the subject of fluoridation is attached as Appendix C (page. 12, 13 & 14).

### 3. Food -

#### a) Meat Inspection.

It will be noted from the Public Health Inspector's statement on page 18 that only a small percentage of the carcasses of animals slaughtered locally was inspected. Thus, out of a total of 1,560 animals slaughtered, 407 or 26% were inspected. This was due as much to the inconvenient times at which slaughtering takes place as to the many preoccupations of the only Public Health Inspector. Although it is hoped that better arrangements will be made to ensure a higher percentage of inspections, it is doubtful if, in the present circumstances, an effective degree of control can be reasonably expected until such time as all slaughtering can be centralised in a public slaughter house designed to serve an economic area.

There are two private slaughter houses in the town which, although reasonably well maintained, suffer from the disadvantages inherent in close proximity to dwellings.

As regards the diseases found in meat, it is clearly impossible to assess the incidence accurately on the small percentage examined, but it would appear from the statement at page 19 in the Health Inspector's Report that the degree of infection is low.

b) Mussels and Whelks - In February 1957 the Ministry of Agriculture and Fisheries carried out a sanitary survey of the waters and mussels in Wells Harbour and found evidence of a variable degree of pollution which might affect the mussels.

This enquiry confirmed the findings of previous surveys which led to the closure of the layings or at least to their use being made only on a clear condition that the mussels are boiled at their destination.

The Ministry's suggestion that cleansing pits for the mussels might be established locally apparently did not receive any encouragement and the matter has therefore been dropped for the time being.

The whelk trade still flourishes however and the whelk boiling sheds on the Quay are busy and well maintained.

#### c) Ice-cream.

Six samples of ice-cream were taken during the year. Five were classified as Grade I and one in Grade II.

W.H. Crichton,  
M.B., Ch.B., D.P.H.

Medical Officer of Health.

APPENDIX A.- CLIMATIC DATA -

	Mean daily Maximum Temp.	Mean daily Minimum Temp.	Mean daily Temp.	Total rainfall (inches)	
January	44.9 (40 )	37.6 (34 )	41.3 (37)	1.87 (3.33)	88.8 (90.7)
February	45.3 (33.9)	35.3 (25.4)	40.3 (29.7)	3.12 (1.80)	89.8 (88.8)
March	53.6 (48.8)	41 (34.7)	47.3 (41.7)	2.41 (0.96)	86.3 (81.7)
April.	53 (49.0)	39.9 (35.4)	46.5 (42.2)	0.54 (1.31)	80 (77.7)
May	56.6 (63.1)	42.1 (44.1)	49.3 (53.6)	1.29 (1.15)	76.5 (70.7)
June	67.5 (60.1)	48.8 (47.8)	58.1 (53.9)	1.74 (3.27)	73.3 (80.2)
July	67.9 (66.1)	54.4 (53.8)	61.1 (59.9)	3.33 (3.61)	84.3 (82.5)
August	65.6 (62.9)	52.4 (48.9)	59 (55.9)	2.39 (3.70)	83 (83.0)
September	59.8 (64.2)	48.3 (50.4)	54.1 (57.3)	4.38 (1.58)	83.8 (86.5)
October	56.9 (54.3)	46.5 (43.1)	51.7 (48.7)	1.47 (2.54)	87 (87 )
November	46.6 (46.3)	40 (37.6)	43.3 (41.9)	1.71 (1.55)	87.3 (92 )
December.	42.8 (45.2)	35.4 (38.8)	39.1 (42.0)	2.60 (1.47)	89.8 (91.2)

Figures in brackets denote preceding years' figures.

APPENDIX B.

## - Summary of Water Examinations -

Source	Sample 1. 20.6.57. Public Supply.	Sample 2. 16.12.57. Public Supply.	Sample 3. 22. 1.57. Shallow well Orchard Farm.
<u>Chemical</u>			
pH	7.3	7.1	
Ammoniacal Nitrogen	-	0.01	
Albuminoid Nitrogen	0.01	0.02	
Nitrates	9.5	12	
Chlorides	60	38	
Nitrites	-	-	
O <sub>2</sub> absorbed	0.44	0.32	
Hardness - Total	285	285	
Temporary	220	225	
Permanent	65	60	
Alkalinity as CaCO <sub>3</sub>	220	225	
Free CO <sub>2</sub>	20	30.5	
Total Solids	430	430	
Iron	-	-	
<u>Bacteriological.</u>			
Colonies per cc @ 37°C.	9	2	-
Presumptive Coli per 100cc.	1	-	13
B. Coli type (faecal)	-	-	-

Comment.

Sample 1. Bacteriological findings satisfactory although the water is not completely free from coliform organisms. Shows a decrease in salinity.  
"Suitable for use as a public supply" @

Sample 2. Good organic quality - no sign of pollution. Bacteriological findings satisfactory. Total hardness high but highest proportion temporary due to dissolved chalk. "Fit for drinking and general purposes".

An additional item was included i.e. fluorine the figure for which was 0.25 parts per million. This is within normal range for East Anglian waters derived from chalk and it is well below the figure regarded as optimum i.e. 1 part per million." @

Sample 3. Satisfactory. @

@ Messrs. Lincoln, Sutton and Wood.

@ Public Health Laboratory, Norwich.



APPENDIX C.

## Note on the

Fluoridation of Water Supplies.

As requested by the Council, I have prepared a brief note on the question of fluoridation of water supplies.

Dental caries (= decay) among school children is widespread. It has in fact become a major public health problem particularly since the war ended owing principally to three factors namely - bad food habits, increased availability and consumption of sweets and an increasing shortage of dentists.

The healthy structure of the teeth is dependent on mineral elements contained in certain foods i.e. calcium, phosphorus and Vitamin D which are to be found in vegetables, meat, fish, eggs, milk, nuts and fruit and regular cleansing habits to remove accumulations of food, especially carbohydrates (sweets, cakes, bread and other starchy foods) which tend to accumulate in teeth crevices where they ferment and attack the protective enamel of the teeth.

It is notorious that the diet of most of our children contains an excess of carbohydrates and not enough of the protective foods and furthermore, that thorough and regular cleansing habits are seldom acquired or maintained.

Dental health education is a difficult and long term process and the effective control of dental caries is probably beyond the resources of the dental services available today, but we have in fluoride a measure of prevention, the efficacy of which is now beyond dispute.

Fluoride is a natural component of many foods and is also present in drinking water in varying and variable degrees. Its association with the prevention of dental caries is interesting in that it was incidental to another enquiry. At the beginning of the century a young dentist (McKay) in Colorado U.S.A. observed and studied the causes of certain mottling of the teeth.

This led to further studies which finally established by the 1930's that fluoride (in excess) was the cause of the mottling and that where this occurred decay of the teeth was progressively diminished (Dean 1946). Thus, at a level of 1 part of fluoride per million parts of water (F 1 ppm), the rate of dental caries among children who had consumed water from birth was found to be 60% lower than among comparable groups who had water containing practically no fluoride (Forest).

As a result of these findings, it was decided to ascertain whether similar results could be obtained by adding fluoride to waters in which it was lacking. Experiments were carried out in 1945 at Grand Rapids, Newburgh, and Brantford in U.S.A. over a period of 10 years. The final reports, published recently, show that there is marked reduction of dental caries among children who have drunk fluoridated water all their lives.

In this Country the survey carried out by Weaver in North and South Shields in 1943 is of particular interest. The fluoride content of these adjacent and similar communities was ascertained. In North Shields it was 0.25 ppm; in South Shields it was 1.4 ppm. One thousand children of comparable age groups and circumstances were examined in each area and it was found that the incidence of dental caries, in both temporary and permanent teeth, was 56% less among the children of South Shields than it was among those of North Shields.



Similar reports with similar findings can be multiplied "ad infinitum" and in 1952, following the report of a special mission sent by the Medical Research Council to America to study fluoridation, demonstration projects have been started in Andover, Anglesey, Kilmarnock and Watford.

My own experience of the fluoride content in this District is so far strictly limited but samples are being taken to ascertain this in different parts and from different sources at frequent intervals. This is necessary because of its variability. However, as you are aware, I had a sample tested at Burnham Thorpe last year (September) where I had noticed an unusually high (some 90%) incidence of dental caries among school children. The Analyst's report was report to you in my Monthly Report at the time and more recently in my Annual Report. The Analyst's opinion was as follows:-

"Fluorine content..... very low compared with figures usually obtained for East Anglian public supplies which are in the neighbourhood of 0.1 ppm ..... The very low figures now recorded may be associated with the observation by the M.O.H. that there appears to be a high incidence of dental caries among school children ..... and suggests that fluoridation of this water supply would be in the public interest".

Reference to the County Council in October 1956, following these findings, elicited the reply that in 1954 the Ministry of Health offered to make the City of Norwich (and its County environments) an area of fluoride demonstration but that it was rejected by the Norwich Corporation. The County Medical Officer is now awaiting the result of routine dental inspections and treatment in the area.

Objections against fluoridation of water supplies have been raised on ethical grounds that it is an infringement of human rights and also on the grounds that fluoride in the drinking water can be harmful. It is difficult to reconcile acceptance of the addition of Chlorine or Ammonia or water softeners on ethical grounds with the objection to the addition of fluoride. As to harmful effects it has been established beyond serious dispute by one eminent authority after another, after the most exhaustive studies that it causes no harmful effects. Amongst these may be cited the report by Alcock on the critical surveys conducted in the cities of Newburgh and Kingston in the U.S.A., over a period of 10 years which concluded that "fluoridation of water supplies carries no risk to the general health and well being of the Community".

During the current year the Government of New Zealand, which is renowned for its thorough Public Health Services, published a "Report of a Commission of Inquiry into the fluoridation of Public Water Supplies" which among many conclusions stated that "no harmful effects on health will follow fluoridation of water supplies". Furthermore they were "satisfied that widespread use should be made of the fluoridation process" and recommend the formation of a national body to encourage, advise and assist local authorities who wish to adopt the process.

Finally, the World Health Organisation, this year set up an Expert Committee on Fluoridation who have declared that "the effectiveness, safety and practicability of fluoridation as a means of preventing dental caries is now established" - this opinion being based on a review of fluoridation projects in use in no less than 17 countries involving well over 30,000,000 people.

There remains the question of the cost of fluoridation. Quoting from a paper by John Longwell, Senior Principal Scientific Officer, Department of Government Chemist - "The costs in this country are based on the actual expenditure at the four fluoridation centres; and of necessity development costs which should not recur if fluoridation becomes a general measure through<sup>out</sup> the Country and do not include costs of labour ..... since in no instance were additional employees necessary because of fluoridation.

Place	Population	Water Consumed galls/per head/ per day.	Total cost pence/perhead/ year.
Anglesey (Half island)	25,000	40	4.7
Andover	16,000	49	7.4
Watford	70,500	43	3.4
Kilnarnock	47,500	85	6.2
		Average	5.4

The total cost of the National Dental Health Service in 1955 was £33,286,816 and this does not include the cost of the School Dental Service. On a population of 50 millions, this works out at 13/6d. per head (per annum) plus the cost of the School Dental Service".

If the findings of the investigations now in progress in the District confirm our fears that the fluoride content of the water is consistently deficient, there seems to be a clear case, on the evidence submitted, for a recommendation to be made that a scheme for the fluoridation of the water supply should be instituted.

There is however one important point to bear in mind and that is that fluoridation, however effective as a preventive measure against dental caries, should never be regarded as a substitute for the education of the public in good food habits and dental care and hygiene but rather as a most useful complementary measure.

P A R T   I I

THE REPORT OF

MR. F. RODWELL, M.R. San. I., M.S.I.A.,

SURVEYOR

and

PUBLIC HEALTH INSPECTOR

WELLS-NEXT-THE-SEA URBAN DISTRICT COUNCIL.

---

(1) Inspections -

The number of inspections carried out in connection with Public Health work during the year were as follows:-

<u>Nature of Inspections</u>	<u>Number of Visits</u>
Housing Survey	109
Housing Repairs, Byelaws.	179
Slaughterhouses	109
Shops	43
Pests Act	45
Factories, Workshops and Bakehouses	12
Nurseries and Miscellaneous	209
	-----
Total	806
	-----

During the year 42 complaints were received regarding nuisances and pests.

(2) Housing -

During the year the preliminary work in connection with the proposed Theatre Road Clearance Area was commenced. The preliminary survey of the area has been completed and necessary plans prepared.

During the year 2 houses were demolished.

Plummers Hill	1
Jolly Sailor Yard	1

New Housing -- During the year the following houses were constructed:-

(i) By the Council	Nil
(ii) By private enterprise	4
	-----
Total	<u>4</u>

Housing Applications -

At the 31st December, 1957, there were 56 applicants on the Council's Housing List and during the year 23 families were rehoused including adjustment of families within the Housing Estates to prevent possible overcrowding.

Improvement Grants -

Applications received during the year	1
Applications approved during the year	1
Financial grants approved during the year	£400

Defects at houses were remedied as the result of informal action. Action taken under Statutory Powers resulted as follows:-

Houses rendered fit	Nil
Houses closed and demolished	Nil
Houses demolished	2

(3) Camping Sites - There are two approved caravan and camping sites in the Urban area.

- (i) The Beach Road Site controlled by the Council.
- (ii) The Orchard Farm, Burnt Street Site - under private control.



During the year the sanitary accommodation at the Orchard Farm site was improved by the provision of three W.C's and drainage facilities for sullage water and is now in a very satisfactory sanitary condition.

(4) Water Supply -

During the year a short extension of the 2" asbestos main at East Quay was carried out to supply the site being developed for private housing.

New connections during the year	4
Number of Domestic properties drawing water supplies from the mains.	958
Dwelling houses not obtaining water from the mains	6

During the year two samples of water were submitted for Analysis and Bacteriological examination, and one sample was submitted from a private well. I append the reports' on the examinations (Appendix B page 11 ).

(5) Sewerage and Sewage Disposal -

Extensions during the year	Nil
Connections to sewers	8
Dwelling houses on cesspool drainage	3
Number of houses which have earth closets	145

(6) Milk Supply -

There are two licenced Dairymen for the distribution of milk within the Area. One sample of milk was submitted for examination during the year with negative results.

(7) Food Preparing Premises.

The following premises are registered under Section 16 of the Food & Drugs Act, 1955.

For the sale of Ice cream	13
Fish and Chip Shops	3
Sausages and potted meats	5
Boiling of shellfish	4
	<u>25</u>

(8) Rodent Control

Rodent poisoning is carried out by the Sewerage Works attendant, who has received training in this work.

During the year poisoning to destroy rats and mice were carried out as follows:-

Council properties	11
Other properties including block treatments	14
Refuse Dump	3
Agricultural land.	3

The serious infestation noted at the refuse dumps in November 1956 was successfully destroyed by joint action with British Railways staff early in the year. /

(9) Refuse Collection --

Refuse collection is carried out by a Karrier Bantan Lorry with a crew of three scavengers.

A weekly collection is carried out to all properties in the town and a twice weekly collection at the Beach Caravan and Camping Site during the season.

Nightsoil is collected twice weekly between 4.30a.m. and 7.00a.m. by the scavengers, by means of a moveable 300 gallon tank placed in the refuse collection vehicle.

During the year the refuse dump which had been in use since 1930 was closed. All surfaces levelled and soil covered.

The new refuse dump is situated in the site of old chalk workings and adjoins the former site and should meet the needs of the town for 20 years.

The cost of the scavenging services during the year ended 31st March, 1958 was £1,673. 3. 10d.

(10) Factories Acts 1937 and 1948.

Number of Premises registered	21
Number inspected	12
Outworkers in connection with Factories	Nil

During the year plans have been approved for the rebuilding of an unsuitable garage.

(11) Meat and Food --

There are two licenced slaughterhouses in the area. There are no Knacker's Yards or premises licenced for the slaughter of horses in the Urban District.

The following Table shows details of animals slaughtered and carcasses inspected during visits to slaughterhouses.

	Cattle	Calves	Sheep & Lambs	Pigs
Number Slaughtered	321	32	645	562
" Inspected	74	2	180	151
<u>All diseases except Tuberculosis and Cysticercosis</u>				
Whole carcasses condemned	1	-	1 (b)	3 (d)
Part or organ condemned	1 (a)	-	2 (c)	
Percentage affected	1.3%	-	1.5 %	2%
<u>T.B. Only</u>				
Whole carcasses condemned	-	-	-	-
Part or organ condemned	-	-	-	1 (c)
Percentage affected	-	-	-	-
<u>Cysticercosis</u>				
Part or organ condemned	-	-	-	-
Carcass treated by refrigeration	-	-	-	-
Generalised & totally condemned	-	-	-	-

It was necessary to condemn the following meat as unfit for human consumption.

Cattle	(a) Injuries	52 lbs.
Sheep	(b) 1 carcase, Moribund	( 90 "
	(c) 2 legs, caseous	( 15 "
	Lymphadenitis	<u>105 "</u>
Pigs	(d) 2 carcasses, Septicaemia	230 "
	(d) 1 carcase, Erysipelas	140 "
	(c) Parts, T.B.	20 "
		<u>390 "</u>
Total weight of meat condemned		<u>547 "</u>

The practice of the butchers carrying out slaughtering in the evenings and at weekends has been discouraged and this will be reflected in the percentage inspected during the present year.

The following fresh and tinned foods were condemned at various shops:-

15 Crabs	44 lbs.
2 Boxes fresh pears	14 "
10 Tins pears	2 "
2 " pears	12 "
6 " peaches	10 "
4 " apricots	2 "
2 " grapefruit	10 "
14 " fruit	4 "
8 " vegetables	23 "
30 " meat	6 "
1 " chopped pork	18 "
3 " ox tongue	
Total	<u>145 lbs</u>

#### (12) Port Health

During the year 12 vessels entered the port, 8 with cargo and 4 light and 12 vessels left the port, 4 with cargo and 8 light.

The following are the places or ports with which Wells had trade:-

<u>Inward</u>	Montrose	Potatoes
	Antwerp	Fertilizer
	Hamburg	"
	Bremen	"
<u>Outward</u>	Whitstable	Wheat
	Margate	"
	Hull	"
	Zeebeek	Barly

No sickness was reported by the Masters of any Vessels entering the port.

F. RODWELL,

Public Health Inspector.





